

FORM
5Rev
09/14

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400784837

Date Received:

DRILLING COMPLETION REPORT

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type ☒ Final completion ☐ Preliminary completion

OGCC Operator Number: 10459

Contact Name: Kaleb Roush

Name of Operator: EXTRACTION OIL & GAS LLC

Phone: (720) 557-8322

Address: 1888 SHERMAN ST #200

Fax:

City: DENVER State: CO Zip: 80203

API Number 05-123-40328-01

County: WELD

Well Name: GP-Dairy

Well Number: 1-20-19

Location: QtrQtr: NENE Section: 20 Township: 5N Range: 65W Meridian: 6

Footage at surface: Distance: 658 feet Direction: FNL Distance: 1305 feet Direction: FEL

As Drilled Latitude: 40.390060 As Drilled Longitude: -104.682500

GPS Data:

Date of Measurement: 02/09/2015 PDOP Reading: 1.5 GPS Instrument Operator's Name: Chase Miller

** If directional footage at Top of Prod. Zone Dist.: 1973 feet. Direction: FSL Dist.: 2174 feet. Direction: FWL

Sec: 20 Twp: 5N Rng: 65W

** If directional footage at Bottom Hole Dist.: 2055 feet. Direction: FSL Dist.: 524 feet. Direction: FWL

Sec: 19 Twp: 5N Rng: 65W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 01/16/2015 Date TD: 02/01/2015 Date Casing Set or D&A: 02/04/2015

Rig Release Date: 02/04/2015 Per Rule 308A.b.

Well Classification:

☐ Dry ☒ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

Total Depth MD 15000 TVD** 6934 Plug Back Total Depth MD 15000 TVD** 6934

Elevations GR 4673 KB 4697

Digital Copies of ALL Logs must be Attached per Rule 308A ☒

List Electric Logs Run:

CBL, GR, Mudlog

CASING, LINER AND CEMENT

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	24	16	42	0	80	100	0	80	VISU
SURF	13+1/2	9+5/8	36	0	1,029	445	0	1,029	VISU
1ST	8+3/4	7	26	0	8,048	1,038	0	8,048	CBL
1ST LINER	6+1/8	4+1/2	13.5	8151	14,996				CALC

STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date: _____

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom

Details of work:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
NIOBRARA	7,850		NO	NO	

Comment:

This rights to drill this well were obtained from Mineral Resources which has drilled several vertical wells in the sections. See API# 05-123-24990 for an Open Hole Log.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Kaleb Roush

Title: Drilling Technician Date: _____ Email: kroush@extractionog.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400788867	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400788870	Directional Survey **	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	DST Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	Logs	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Other	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
<u>Other Attachments</u>					
400788549	PDF-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400788863	LAS-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400788871	DIRECTIONAL DATA	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400790097	WELLBORE DIAGRAM	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400797458	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400797459	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400797460	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400797462	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400797463	LAS-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400797464	PDF-MUD	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400797471	LAS-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400800751	LAS-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400800753	PDF-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400800755	PDF-GAMMA RAY	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)